Approved for use through 7/31/2006, OMB 0651-0032
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ed to respond to a collection of Information unless it displays a valid OMB control number.

		NT ADDITCA	TION F	FF DE LEVI	MINALIOIS	RECORD		109	10770	<u>3 </u>
<u>) (</u>	tober	1 2004 s CLAIMS AS F	ILED - F	to to the to		SMALL E	πιτχ	OR [OTHER SMALL E	
FOR NUMBER FILED NUMBER EXTRA					RATE	FEE	ļ	RATE	FEE	
	ASIC FEE					:395	OR	-10	,740	
OTAL CLAIMS				_		× 5 9 =		OR	x \$ 8 = .	
7 CFR 1.16(c)) IDEPENDENT CLAIMS		<u> </u>	minus 20 =			x 44 =		OR 1	x \$ 85 =	
37 CFR 1.16(b)) minus 3 = .				+:150=		OR	+:300=	•		
ULT	IPLE DEPENDEN	T CLAIM PRESENT	(37	CFR 1.16(d))		+ \$ 1.70 =				
lf th	e difference in co	olumn 1 is less than	zero, ente	r *0* in column 2.		TOTAL		OR .	TOTAL	
		AIMS AS AME						•		
	, CL	AIMS AS AIME	אטבט –	1 Mill III		01411	ACTITY	OR	OTHER THAN SMALL ENTITY	
		(Column 1)		(Column 2)	(Column 3)	SMALL E	NIII			•
7		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	·	RATE	ADOI- TIONAI FEE
	Total	AMENDMENT	Minus	**	=	x \$ 9 =		OR	x \$ 8 =	
NDMEN	(37 CFR 1.16(d)) Independent	•	Minus	***	=	× 44 =		OR	x \$ 88 =	
ME	(37 CFR 1.16(b))					1.50		OR	+.200 =	
A	FIRST PRESENT	ATION OF MULTIPLE	DEPENDE	NT CLAIM (37 CFF	R 1.16(d))	+ \$50= TOTAL			TOTAL	14.4
						ADD'L FEE		OR	ADDILFEE	
		(Column 1)		(Column 2)	(Column 3)		1	1		
TB	0/2/1	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADO TION/ FEE
MENT	Total	AMENDMENT /	Minus	-20	=	x \$ 4 =		OR	x \$ /8 =	
	(37 CFR 1.16(d)) Independent	• 7	Minus	" 3	=	x s <u>44</u> =		OR	x \$ <u>88</u> =	
MEN	(37 CFR 1.16(b))				<u> </u>	1 1		OR	+.300=	
A	FIRST PRESEN	TATION OF MULTIPL	+\$/50=	-	-	TOTAL				
						ADD'L FEE		OR	ADD'L FEE	
		/Cal 4\		(Column 2)	(Column 3)			-		· ·
ر د	İ	(Column 1) CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	TIO1
Z		AMENDMENT	Adinos	PAID FOR	=	0		OR	x s /8 =	
LUMMONUM	Total (37 CFR 1.16(c))		Minus	•••	=	x \$=	_		× \$58 =	
Z	Independent (37 CFR 1.16(b))	•	Minus			x \$44 =	1	OR	210	. ž
A	FIRST PRESEN	NTATION OF MULTIP	+s/5C= TOTAL ADD'L FEE		OR OR	TOTAL				

"If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20"

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1 This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complication. including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any commendation of the complete application form to the USPTO. on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. U.S. Panel Trade-100 Control of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. U.S. Panel Trade-100 Control of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. U.S. Panel Trade-100 Control of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO 1 ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

[&]quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Dockel Number 10/707703

CLAIMS AS FILED - PART (Column 1)				(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		3	
TOTAL CLAIMS								RATE	FEE		RATE	FEE
FOR N				NUMBER FILED		NUMBER EXTRA		basic fee	385.00	OR	BASIC FEE	770.00
TO	TAL CHARGEA	ABLE CLAIMS	. minus 20=		•			X\$ 9≈		OR	X\$18≈	
INDEPENDENT CLAIMS minus 3 :				nus 3 =	•			X43=		ÓR	X8 <u>,</u> 6≑ .	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
• If the difference in column 1. is less than zero, enter						olumn 2		TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II								SMALL E	LITITY	OR	OTHER SMALL	
		(Column 1) CLAIMS		(Colun		(Column 3)	l 6	SMALL	ADDI-			ADDI-
NTA	9/13/4	REMAINING AFTER AMENDMENT		NUMI PRÉVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		PATE	TIONAL
AMENDMENT A	Total	- 11	Minus	- 2		•		X\$ 9=		OR	X\$18=	
	Independent	. 2	Minus	443		=		X43=		OR	X86=	
6	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM			+145= '		OR	+290=	
								TOTAL	•	22	TOTAL	
•		10 .) 41		(Calua	O	(Column 2)		AODIT. FEE (• •	Į Ori	ADDIT. FEE	
		(Column 1)		(Colur HIGH	كالمكافرة المناسب	(Column 3)	1 :		ADDI-	•••		ADDI-
AMENOMENT B	•	REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	TIONAL	٠	RATE.	TIONAL FEE
	Total	•	Minus	44		2		X\$ 9=		OR	X\$18=	
ME	Independent		Minus	694		-		X43=		OR	X86=	•
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=	
								TOTAL		OR	TOTAL ADDIT. FEE	
		(Caluma 1)		(Colu	ma 21	(Column 3)		ADDIT. FEE		•	ADDII. 1 CC	
		(Column 1)		KIGH		(COMMINIO)	1		ADDI-	i		ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	•	Minus	••	<i>*</i>	=		X\$ 9=		OR	X\$18=	·
	Independent	•	Minus	***		=		X43=		OR	X86=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
	1 tha	ma t is less than th	a antaria ast	بلاسيد 2 مص	• *0* in a	dumo 3		+145=		OR	+290=	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE												
The 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3." The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.												